

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: <div style="font-size: 2em; text-align: center;">2</div>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="text-align: center; font-size: 1.5em;">Linda L.</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="text-align: center; font-size: 1.5em;">Martin</div>		<div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Received</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Hand-delivered or Date Postmarked</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Receipt #</span> <span>Amount \$</span> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Processed</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Imaged</div>
	<div style="display: flex; justify-content: space-between;"> <span>ADDRESS / PO BOX;</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="text-align: center; font-size: 1.2em;">305 Lark Lane Euless, Tx 76039</div> <div style="margin-top: 5px;"> <input type="checkbox"/> Change of Address         </div>		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="text-align: center; font-size: 1.2em;">(817) 283-7038</div>		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="text-align: center; font-size: 1.5em;">Donald E.</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="text-align: center; font-size: 1.5em;">Martin</div>		
<b>6</b> CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <span>STREET ADDRESS (NO PO BOX PLEASE);</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="text-align: center; font-size: 1.2em;">305 Lark Lane Euless, Tx 76039</div>		
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="text-align: center; font-size: 1.2em;">(817) 283-7038</div>		
<b>8</b> CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <span>January 15</span> <span>30th day before election</span> <span>Runoff</span> <span>15th day after campaign treasurer appointment (Officeholder Only)</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input checked="" type="checkbox"/> July 15</span> <span><input type="checkbox"/> 8th day before election</span> <span><input type="checkbox"/> Exceeded \$500 limit</span> <span><input type="checkbox"/> Final Report (Attach C/OH - FR)</span> </div>		
<b>9</b> REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <div>             Month Day Year              01 / 01 / 2020           </div> <div>THROUGH</div> <div>             Month Day Year              06 / 30 / 2020           </div> </div>		
<b>10</b> PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div>             ELECTION DATE              Month Day Year              / /           </div> <div>             ELECTION TYPE  <input type="checkbox"/> Primary   <input type="checkbox"/> Runoff   <input type="checkbox"/> Other Description  <input type="checkbox"/> General   <input type="checkbox"/> Special           </div> </div>		
<b>11</b> ELECTION	<div style="display: flex; justify-content: space-between;"> <div>             OFFICE HELD (if any)   <div style="font-size: 1.5em;">Mayor</div> </div> <div>             OFFICE SOUGHT (if known)           </div> </div>		
<b>12</b> OFFICE			
<b>GO TO PAGE 2</b>			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,  
UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 2392.29

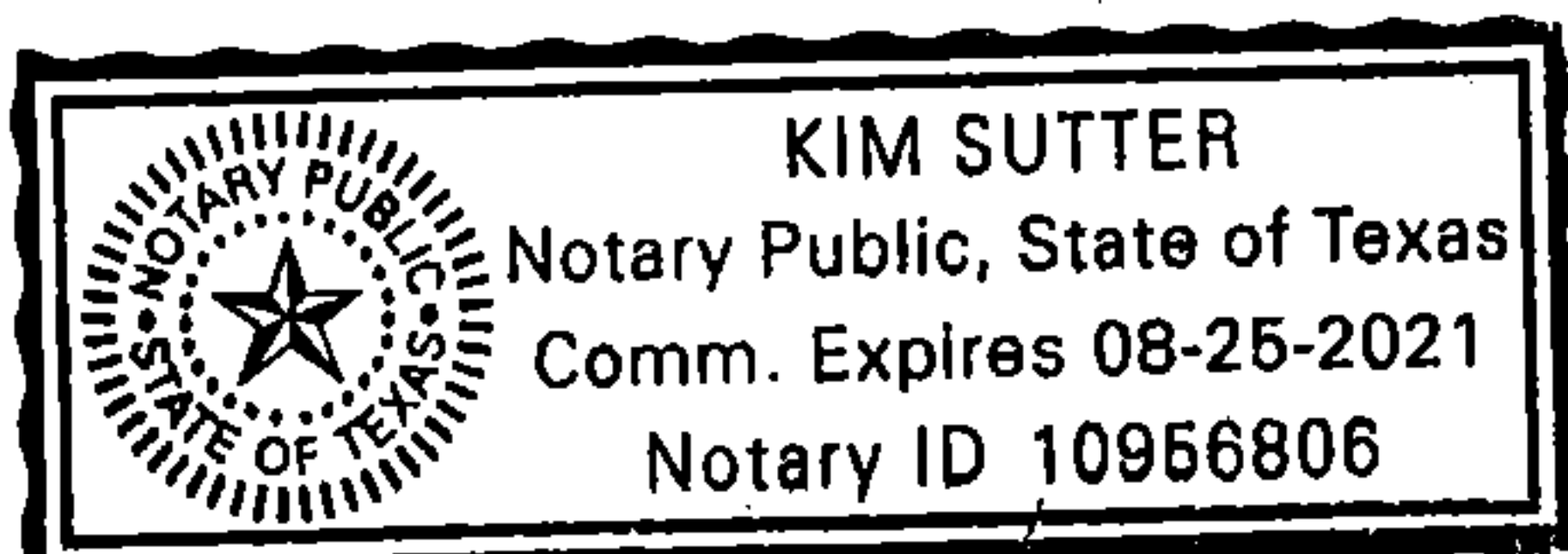
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 2392.29

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

*Linda Martin*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Linda Martin, this the 15  
day of July, 2020, to certify which, witness my hand and seal of office.

*Kim Sutter*  
Signature of officer administering oath

Kim Sutter  
Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath